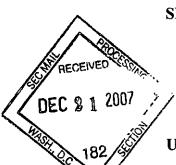
## FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response... 16



Name of Offering ( Check if this is an am		as changed, and i	ndicate change.)		- 0, 200
Series A Preferred Stock Financ	ing				<u>.</u>
Filing Under (Check box(es) that apply):	[ ] Rule 504	[ ] Rule 505	[ <b>X</b> ] Rule 506	6 [ ] Section 4(6)	[ ]ULOE
Type of Filing: [X] New Filing [] Amen					
	A. BASI	CIDENTIFICATION	N DATA		<u> </u>
1. Enter the information requested about the					
Name of Issuer (check if this is an amendment	ent and name has cha	inged, and ndicate	e change.)	~	
Fastgen Corporation					
Address of Executive Offices	(Number and Stree				(Including Area Code)
	1510 Fashion Is	•	uite 200	(650) 356-1112	
	San Mateo, CA	94404			
Address of Principal Business Operations	(Number and Stree	et, City, State, Zip	Code)	Telephone Number	(Including Area Code)
(if different from Executive Offices)					PROCESSE
				/	1 444.
		<u></u>			/JAN 0 8 2008
Brief Description of Business				Ţ	THOMSON
Consulting and wholesale sales	<u> </u>			_ <del></del>	FINANCIAL
Type of Business Organization					
[ ] corporation	[ ] limited partnershi	p, already formed		[ ] other (please spec	cify):
[ ] business trust	[ ] limited partnershi	p, to be formed			
		Month	Year		
Actual or Estimated Date of Incorporation o	or Organization:	[07]	[04] [X	] Actual [ ] Estimated	d
Jurisdiction of Incorporation or Organization	n: (Enter two-letter U.S	S. Postal Service	abbreviation for Stat	te:	
	CN for Canada; F			[CA]	

### **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

		A. BASIC IDE	NTIFICATION DATA			
2. Enter the information reque						
			I within the past five year			
<ul> <li>Each beneficial own of the issuer;</li> </ul>	ner having the power t	to vote or dispose, o	or direct the vote or disp	position of, 10% or mo	re of a c	lass of equity securities
	er and director of cor	porate issuers and o	of corporate general an	d managing partners	of partne	ership issuers; and
	nanaging partner of pa	•		<b>5 0</b> .	•	•
Check Box(es) that Apply:	[ ] Promoter	[ X ] Beneficial Owner	[ X ] Executive Officer	[ X ] Director	[]	General and/or Managing Partner
Full Name (Last name first, if	individual)					
Tam, Albert Wing-Kir						
Business or Residence Addre						
1510 Fashion Island	Blvd., Suite 200,	San Mateo, CA	94404			
Check Box(es) that Apply:	[ ] Promoter	[ X ] Beneficial Owner	[X]Executive Officer	[ X ] Director	[]	General and/or Managing Partner
Full Name (Last name first, if	•		•			
Cheng, Michael Chi I						
Business or Residence Addre			Code)			
106 Oak Haven Place		CA 94041				
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ X ] Executive Officer	[ ] Director	[]	General and/or Managing Partner
Full Name (Last name first, if	individual)					
Tauber, Paul J.		· · · · · · · · · · · · · · · · · · ·				
Business or Residence Addre	•	•	•			
One Ferry Building, S	Suite 200, San Fra	<del></del>	<u> 111                                  </u>	<del></del>		
Check Box(es) that Apply:	[ ] Promoter	[ X ] Beneficial Owner	[ ] Executive Officer	[X]Director	[]	General and/or Managing Partner
Full Name (Last name first, if Leung, Anselm N.	individual)					
Business or Residence Addre	ss (Number and Street	et, City, State, Zip C	Code)	· <u>- · · · · · · · · · · · · · · · · · ·</u>		
10 Baccharis Place, 1	<u> Fiburon, Californi</u>	ia 94920				
Check Box(es) that Apply:	[ ] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[X]Director	[]	General and/or Managing Partner
Full Name (Last name first, if Lai, N.C. Joseph	individual)	•				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip C	Code)			
W302N6117, Stence I	Road, Hartland, V	VI 53029	•			
Check Box(es) that Apply:	[] Promoter	[ X ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[]	General and/or Managing Partner
Full Name (Last name first, if Chuen, Tong Pak	individual)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				
Business or Residence Addre	ess (Number and Stree	et, City, State, Zip C	ode)			
House A Over Thorpe	e, 24-28, Mount A	ustin, Hong Ko	ng, China			
Check Box(es) that Apply:	[ ] Promoter	[ X ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[]	General and/or Managing Partner
Full Name (Last name first, if Hofung Holdings, Lin	•					<u> </u>
Business or Residence Addre P.O. Box 88, 1 Grenv	ss (Number and Stree		•	nds		
	-,					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. INFOR		ABOUT OF	ERING			Vaa	Ma
4 lles	the leaves		a tha ian:-	r intonel te	nall ta an-	المقالم معمد	invoctom :-	this offsis	a?		Yes	No [X]
ı. Has	s the issuer							uns onenn	yf	•••••••	[]	[ ^ ]
		A	nswer also	in Appendi	x, Column 2	?, if filing un	ider ULOE.					
2. Wh	at is the min	imum inves	stment that	will be acc	epted from a	any individu	ıal?				\$	n/a
											Yes	No
3. Doe	es the offerir	ng permit jo	int ownersh	ip of a sing	le unit?						[X]	[]
con offe and ass	er the inform nmission or ering. If a pe l/or with a st ociated pers	similar rem rson to be l ate or state sons of suc	uneration for isted is an a es, list the n h a broker o	or solicitation resociated ame of the	n of purcha person or a broker or d	sers in con gent of a b ealer. If mo	nection with roker or dea re than five	n sales of saler register (5) persons	ecurities in ed with the s to be liste	the SEC d are		
Full Na	me (Last na	me first, if i	ndividual)									
Busines	ss or Reside	ence Addres	ss (Number	and Street	. City. State	. Zip Code	)	, .		•		
							<i>•</i> 					
Name o	of Associate	d Broker or	Dealer									
States i	in Which Pe	rson Listed	Has Solicit	ed or Inten	ds to Solicit	Purchaser	\$					<u></u>
	"All States"									ı	] All Sta	tes
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	(ID)
 [IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	(OR)	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last na	me first, if i	ndividual)						·····			
	ss or Reside	neo Addro	ee /Numbor	and Street	City State	Zin Codo	`	<del></del>	<del></del>			
HILCORD	22 N I/C2IN	alce Audie	ss (muniber	and Succi	i, Oily, State	, zip couc	,					
Busines												
	of Associate	d Broker or	Dealer									
Name o	of Associate			ed or Inten	ds to Solicit	Purchaser	<u>s</u>					
Name o		rson Listed	Has Solicit		ds to Solicit	Purchaser	S			i	) All Sta	tes
Name of States if (Check	in Which Pe	rson Listed	Has Solicit		ds to Solicit	Purchaser [CT]	s [DE]	[DC]	[FL]	[GA]	) All Sta	tes (ID)
Name of States i (Check [AL]	in Which Pe "All States" [AK] [IN]	rson Listed or check in [AZ] [IA]	Has Solicit ndividual Sta [AR] [KS]	ates) [CA] [KY]	[CO]	[CT] [ME]	[DE] [MD]	[MA]	[MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
Name of States if (Check [AL] [IL] [MT]	in Which Pe "All States" [AK] [IN] [NE]	rson Listed or check in [AZ] [IA] [NV]	Has Solicit dividual Sta [AR] [KS] [NH]	ites) [CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]		[MI] (OH)	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
Name of States i (Check [AL] [IL] [MT] [RI]	in Which Pe "All States" [AK] [IN] [NE] [SC]	rson Listed or check in [AZ] [IA] [NV] [SD]	Has Solicit dividual Sta [AR] [KS] [NH]	ates) [CA] [KY]	[CO]	[CT] [ME]	[DE] [MD]	[MA]	[MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
Name of States i (Check [AL] [IL] [MT] [RI]	in Which Pe "All States" [AK] [IN] [NE]	rson Listed or check in [AZ] [IA] [NV] [SD]	Has Solicit dividual Sta [AR] [KS] [NH]	ites) [CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[MA] [ND]	[MI] (OH)	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
States i (Check [AL] [IL] [MT] [RI]	in Which Pe "All States" [AK] [IN] [NE] [SC]	rson Listed or check in [AZ] [IA] [NV] [SD] me first, if i	Has Solicit dividual St [AR] [KS] [NH] [TN]	ates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	(CT) (ME) (NY) (VT)	[DE] [MD] [NC] [VA]	[MA] [ND]	[MI] (OH)	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
States i (Check [AL] [IL] [MT] [RI]	in Which Pe "All States" [AK] [IN] [NE] [SC] me (Last na	rson Listed or check in [AZ] [IA] [NV] [SD] me first, if i	Has Solicit dividual St [AR] [KS] [NH] [TN]	ates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	(CT) (ME) (NY) (VT)	[DE] [MD] [NC] [VA]	[MA] [ND]	[MI] (OH)	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
Name of States in (Check [AL] [IL] [MT] [RI] Full National Busines	in Which Pe "All States" [AK] [IN] [NE] [SC] me (Last na	rson Listed or check in [AZ] [IA] [NV] [SD] me first, if i	Has Solicit Idividual Sta [AR] [KS] [NH] [TN] Individual)	ates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	(CT) (ME) (NY) (VT)	[DE] [MD] [NC] [VA]	[MA] [ND]	[MI] (OH)	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
States i (Check [AL] [IL] [MT] [RI] Full Nat Busines	in Which Pe "All States" [AK] [IN] [NE] [SC] me (Last na	rson Listed or check in [AZ] [IA] [NV] [SD] me first, if inence Addressed	Has Solicit dividual Sta [AR] [KS] [NH] [TN] ndividual) ss (Number	ates) [CA] [KY] [NJ] [TX] and Street	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[MA] [ND]	[MI] (OH)	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
States i (Check [AL] [IL] [MT] [RI] Full National Busines	in Which Pe "All States" [AK] [IN] [NE] [SC] me (Last na ss or Reside	rson Listed or check in [AZ] [IA] [NV] [SD] me first, if in ence Address d Broker or	Has Solicit dividual St [AR] [KS] [NH] [TN] ndividual)  SS (Number	ed or Inten	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[MA] [ND]	[MI] (OH)	[GA] [MN] [OK] [WI]	[HI] [MS] [OR]	(ID) (MO) (PA) (PR)
States i (Check [AL] [IL] [MT] [RI] Full National Busines	in Which Pe "All States" [AK] [IN] [NE] [SC] me (Last na ss or Reside of Associate	rson Listed or check in [AZ] [IA] [NV] [SD] me first, if in ence Address d Broker or	Has Solicit dividual St [AR] [KS] [NH] [TN] ndividual)  SS (Number	ed or Inten	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[MA] [ND]	[MI] (OH)	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) (MO) (PA) (PR)
Name of States i (Check [AL] [IL] [MT] [RI] Busines Name of States i (Check	in Which Pe "All States" [AK] [IN] [NE] [SC] me (Last na ss or Reside of Associate in Which Pe "All States"	rson Listed or check in [AZ] [IA] [NV] [SD] me first, if i ence Addres d Broker or	Has Solicit dividual Sta [AR] [KS] [NH] [TN] ndividual) ss (Number Dealer Has Solicit dividual Sta	ed or Intendates)	[CO] [LA] [NM] [UT]  City, State	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) (MO) (PA) (PR)
Name of States if (Check [AL] [IL] [RI] Full Name of States if (Check [AL]	in Which Pe "All States" [AK] [IN] [NE] [SC] me (Last na ss or Reside of Associate in Which Pe "All States"	rson Listed or check in [AZ] [IA] [NV] [SD] me first, if i ence Addres d Broker or rson Listed or check in [AZ]	Has Solicit dividual Sta [AR] [KS] [NH] [TN] ndividual) ss (Number Dealer Has Solicit dividual Sta	ates) [CA] [KY] [NJ] [TX]  and Street  ed or Intentates) [CA]	[CO] [LA] [NM] [UT]  , City, State	[CT] [ME] [NY] [VT]  e, Zip Code  Purchaser [CT]	[DE] [MD] [NC] [VA]	[MA] [ND] [WA]	[MI] (OH) [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) (MO) (PA) (PR)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	AND USE OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [ ] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 0	\$ 0
	Equity	\$ <u>1,500,000.70</u>	<b>\$</b> 1,073,600.00
	[ ] Common [ X ] Preferred		
	Convertible Securities (including warrants)	\$ <u> </u>	\$ <u>0</u>
	Partnership Interests	\$ <u> </u>	\$0
	Other (Specify)	\$ <u> </u>	\$ <u> </u>
	Total	\$ <u>1,500,000.70</u>	\$ <u>1,073,600.00</u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer "none" or "zero."	s is	
		Number	Aggregate Dollar Amount
	Type of Security	Investors	of Purchases
	Accredited Investors	8	\$ <u>1,073,600.00</u>
	Non-accredited Investors	0	\$ <u> </u>
	Total (for filing under Rule 504 only)	0	\$0
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for a securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
		Type of occurry	
	Rule 505		\$ <u>U</u>
	Regulation A		\$ <u> </u>
	Rute 504		\$0
	Total		\$ <u> </u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	of nt	
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$0
	Legal Fees		\$0
	Account Fees		\$0
	Engineering Fees	[]	\$0
	Sale Commissions (specify finders' fees separately)	[]	\$0
	Other Expenses (identify)	[]	\$0
	Total	[]	\$0

	C. OFFERING PRICE, NUMBER O	OF INVESTORS, EXPENS	SES A	ND U	SE OF PROCEE	DS	
(	Enter the difference between the aggregate offering price gi Question 1 and total expenses furnished in response to Par difference is the "adjusted gross proceeds to the issuer."	t C -Question 4.a. This				\$	<u>1,073,600,0</u> 0
t: fi li	ndicate below the amount of the adjusted gross proceeds to be used for each of the purposes shown. If the amount fournish an estimate and check the box to the left of the estinisted must equal the adjusted gross proceeds to the issuer - Question 4.b above.	or any purpose is not know nate. The total of the payn	m, nents art C	Payme	ents to Officers,		, , , , , , , , , , , , , , , , , , ,
					rs, and Affiliates		Payments to Others
	Salaries and fees				<u>322,080</u>	[]	\$ <u> </u>
	Purchase of real estate				0	[]	\$ <u> </u>
	Purchase, rental or leasing and installation of machinery	and equipment	[]	\$	0	[]	\$ <u>0</u>
	Construction or leasing of plant buildings and facilities	***************************************	[]	\$	0	[]	\$ <b>0</b>
	Acquisition of other businesses (including the value of soffering that may be used in exchange for the assets or issuer pursuant to a merger)	securities or another	[]	\$	. 0	[]	s <u> </u>
	Repayment of indebtedness	**************	[]	\$	0		\$ 0
	Working capital		11	\$	0	ÍΝ	\$ 751.520
	Other (specify):		ii	s	0		\$ 0
			11	\$	0	11	s 0
			[]	<u>*</u> —	Ö	11	s 0
	Column Totals		[V]	\$	322,080	[2]	\$ 751,520
	Total Payments (column totals added)			·			600.00
	D.	FEDERAL SIGNATURE					
signa	issuer has duly caused this notice to be signed by the unde ature constitutes an undertaking by the issuer to furnish to t mation furnished by the issuer to any non-accredited invest	the U.S. Securities and Ex	chan	ge Co	mmission, upon w	ider Ri vritten	ule 505, the following request of its staff, the
issu	er (Print or Type)	Signature	1	1			Date / / /
Fas	tgen Corporation	Aber	70	Ch	<i></i>		11/16/2007
Nam	e of Signer (Print or Type)	Title of Signer (Print or T	ype)				7
Alb	ert Tam	President					

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations (see 18 U.S.C. 1001.)

E. STATE SIGNATURE			
	Yes	No	
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	[]	[X]	
See Appendix, Column 5, for state response.			

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Fastgen Corporation	Abert Cac	11/16/2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Albert Tam	President	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures

				APPENDIX						
1		2	3		5					
	Intend to non-ad investors (Part B-	ccredited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and Amount in State (Part C⊸ltem 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA		Х	Series A Preferred Stock	1	\$100,000	0	\$0		Х	
co									<u> </u>	
СТ									,	
DE										
DC										
FL					····					
GA										
н									ļ	
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IL										
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MI	<u>.</u>									
MN										
MS										
МО										
МТ										
NE										
NV					<u> </u>					
NH										
NJ										
NM										
NY										

				APPENDIX					
1	- 2	)	3		5				
	Intend to non-ac investors (Part B-	ccredited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and Amount in State (Part C–Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- accredited Investors	Amount	Yes	No
NC									
ND									
ОН									
ОК									
OR									
PA									
RI									
SC							······································		
SD		1 -							
TN									
TX	·								
UT									
VT					]				
VA		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
WA		Х	Series A Preferred Stock	1	\$30,000	0	\$0		X
wv									
WI		Х	Series A Preferred Stock	1	\$193,600	0	\$0		X
WY									
PR									
Non US		X	Series A Preferred Stock	5	\$750,000	0	\$0		X

